



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Gauldie et al.
Application No.: 09/742,892
Filed: 12/21/00

Docket No. ARK-P001
Group No.: 1635
Examiner: Schnizer, Richard A.

Title: Acne Vaccine

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**NOTICE OF APPEAL FROM THE PRIMARY EXAMINER
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES
(37 C.F.R. § 1.191)**

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the Examiner, finally rejecting claims 1, 4-14, 17-19, and 21-25. A petition for revival of an Application for Patent Abandoned Unintentionally Under 37 CFR 1.137(b) is submitted herewith.

The item(s) checked below are appropriate:

1. STATUS OF APPLICANT

This application is on behalf of

☐ other than a small entity

☒ a small entity

2. FEE FOR FILING NOTICE OF APPEAL

Pursuant to 37 C.F.R. § 1.17(b), the fee for filing the Notice of Appeal is:

☒ small entity

\$165.00

☐ other than a small entity

\$330.00

Notice of Appeal fee due is \$165.00

3. EXTENSION OF TERM

The proceedings herein are for a patent application and the provisions of 37 C.F.R. § 1.136 apply.

- (a) ☐ Applicant petitions for an extension of time under 37 C.F.R. § 1.136 (fees: 37 C.F.R. § 1.17(a)(1)-(4) for the total number of months checked below.

<u>Extension (months)</u>	<u>Fee Other than small entity</u>	<u>Fee For small entity</u>
<input type="checkbox"/> one month	\$110.00	\$55.00
<input type="checkbox"/> two months	\$410.00	\$205.00
<input type="checkbox"/> three months	\$930.00	\$465.00

Fee: \$ 0.00

If an additional extension of time is required, please consider this a petition therefor.

- ☐ An extension for ____ month has already been secured. The fee paid therefor of \$ 0.00 is deducted from the total fee due for the total months of extension is now requested.
Extension fee due with this request \$ 0.00

or

- ☒ Applicant believes that no extension of term is required. However, should Applicant inadvertently miscalculated the required fee, the Commissioner is hereby authorized to charge any necessary amount associated with this communication or credit any overpayment to Deposit Account No. 500482

4. TOTAL FEE DUE

The total fee due is:

Notice of Appeal fee \$ \$165.00

Extension fee (if any) \$ 0.00

TOTAL FEE DUE \$ 165.00

5. FEE PAYMENT

☒ Attached is a check No. _____ in the sum of \$ 165.00

☐ Charge Account No. _____ the sum of \$ _____.

A duplicate of this transmittal is attached.

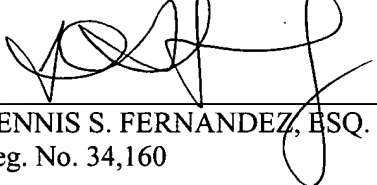
6. FEE DEFICIENCY

☒ If any additional extension and/or fee is required,
charge Account No. 500482

AND/OR

☐ If any additional fee for claims is required,
charge Account No. _____

SIGNATURE OF PRACTITIONER



DENNIS S. FERNANDEZ, ESQ.
Reg. No. 34,160

Dated: 03/08/04

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